Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) National Draft Donald J.Trump for President 2024 Committee PO Box 766 ADDRESS (number and street) (Check if address is changed) Hershey 17033 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS robertjeffries5525@gmail.com (Check if address is changed) Optional Second E-Mail Address Bobby@Trumpdraftcommittee.com COMMITTEE'S WEB PAGE ADDRESS (URL) Trumpdraftcommittee.com (Check if address is changed) DATE 2022 C00814079 FEC IDENTIFICATION NUMBER 3. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Jeffries, Robert, J, Mr., Type or Print Name of Treasurer Jeffries, Robert, J, Mr., [Electronically Filed] 04 30 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		
(d)		(Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
_	Corporation Wo Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised	02/2009)		Page 3
Write or Type Committee Name			raye J
	Donald J.Trump for	President 2024	Committee
	Organization, Affiliated Committee,		
NONE			
	<u> </u>		
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committe	Joint Fundraising Represe	ntative Leadership PAC Sponsor
Custodian of Records: Idea books and records.	ntify by name, address (phone numbe	er optional) and position of the	e person in possession of committee
Jeffries, R	obert, J, Mr.,		
	PO Box 766		
Mailing Address			
	Hershey	PA	17033
Title or Position	CITY	STATE	ZIP CODE
Treasurer/Founder		Telephone number	717 919 4049
3. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional assistant treasurer).) of the treasurer of the committ	ee; and the name and address of
	obert, J, Mr.,		ı
of Treasurer	IPO Box 766		
Mailing Address			
	Horsboy		147022
	Hershey	PA STATE	17033 ZIP CODE
Title or Position Treasurer/Founder		Telephone number	717 - 919 - 4049
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FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Walb Agent	oorn Jr. CPA, Ronald, , Mr,		
Mailing Address	3601 N. Front St.		
	Harrisburg CITY	PA STATE	17110 ZIP CODE
Title or Position DA/Asst.Treasurer	Telephone no	umber 7	717 - 919 - 3947
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